# NAVY ALCOHOL AND DRUG ABUSE PREVENTION (NADAP)

## **SEPTEMBER 2014**





### SEPTEMBER 27 IS NATIONAL TAKE BACK DAY

On Saturday, September 27 from 10 a.m. to 2 p.m., the Drug Enforcement Administration (DEA) will give the public another opportunity to rid their homes of potentially dangerous expired, unused, and unwanted prescription drugs. Old prescription drugs can be brought to local collection sites located throughout the United States and the service is free and anonymous, no questions asked. To find a collection site in your area visit <a href="https://www.deadiversion.usdoj.gov/drug\_disposal/takeback/index.html">www.deadiversion.usdoj.gov/drug\_disposal/takeback/index.html</a> or contact the Call Center at 1-800-882-9539.

In April 2014, Americans turned in 390 tons (over 780,000 pounds) of prescription drugs at nearly 6,100 sites operated by the DEA and more than 4,400 of its state and local law enforcement partners. When those results are combined with what was collected in the previous eight Take Back events, DEA and its partners have taken in over 4.1 million pounds—more than 2,100 tons—of pills.

This initiative addresses a vital public safety and public health issue. Medicines that languish in home cabinets are highly susceptible to diversion, misuse, and abuse. Rates of prescription drug abuse in the U.S. are alarmingly high, as are the number of accidental poisonings and overdoses due to these drugs. Studies show that a majority of abused prescription drugs are obtained from family and friends, including from the home medicine cabinet. In addition, Americans are now advised that their usual methods for disposing of unused medicines—flushing them down the toilet or throwing them in the trash—both pose potential safety and health hazards.

DEA is in the process of approving new regulations that implement the Safe and Responsible Drug Disposal Act of 2010, which amends the Controlled Substances Act to allow an "ultimate user" (that is, a patient or their family member or pet owner) of controlled substance medications to dispose of them by delivering them to entities authorized by the Attorney General to accept them. The Act also allows the Attorney General to authorize long term care facilities to dispose of their residents' controlled substances in certain instances.

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### NATIONAL RECOVERY MONTH

National Recovery Month (http://www.recoverymonth.gov) is nationally observed during September. National Recovery Month educates Americans on the fact that addiction treatment and mental health services can enable those with a mental and/or substance use disorder to live a healthy and rewarding life. The observance's main focus is to laud the gains made by those in recovery from these conditions, just as we would those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease. Recovery Month spreads the positive message that behavioral health is essential to overall health, prevention works, treatment is effective, and people can and do recover. Recovery Month promotes the message that recovery in all its forms is possible, and also encourages citizens to take action to help expand and improve the availability of effective prevention, treatment, and recovery services for those in need.

### WHAT IS RECOVERY?

Recovery from mental disorders and/or substance abuse disorders is a process of change through which individuals:

- Improve their health and wellness
- Live a self-directed life
- Strive to achieve their full potential

## FOUR MAJOR DIMENSIONS SUPPORT A LIFE IN RECOVERY:

- Health: Make informed, healthy choices that support physical and emotional wellbeing.
- Home: Have a stable and safe place to live.
- Purpose: Engage in meaningful daily activities, such as a job or school, volunteering, caring for your family, or being creative.
   Work for independence, income, and resources to participate in society.
- Community: Build relationships and social networks that provide support.

### **DEVELOP A RECOVERY PLAN**

If you are struggling with a substance abuse or mental health problem, you may want to develop a written recovery plan. Recovery plans:

- Enable you to identify goals for achieving wellness
- Specify what you can do to reach those goals
- Include daily activities as well as longer term goals
- Track any changes in your mental health problem
- Identify triggers or other stressful events that can make you feel worse, and help you learn how to manage them

Recognizing that you have a problem with alcohol is the first step in recovery.

Command referrals and self-referrals are means of early intervention in the progression of substance abuse where members can obtain help before a problem becomes more advanced and more difficult to resolve without risk of disciplinary action. Qualified self-referral agents include:

- Drug and Alcohol Program Advisors
- Commanding Officers, XOs, OICs, or CMDCMs/Chiefs of the Boat (COB)
- Navy drug and alcohol counselors (or interns)
- Department of Defense medical personnel
- Chaplains
- Fleet and Family Support Center counselors

### SEPTEMBER IS SUICIDE PREVENTION MONTH

The theme of 2014 Navy Suicide Prevention Month is "Every Sailor,

Every Day", focusing on peer connections and personal responsibility. Every Sailor, Every Day messaging for Suicide Prevention Month is designed to promote open communication between shipmates, to encourage ongoing support and involvement during both calm waters and rough seas. Every day, we each have the opportunity to be there for our shipmates—and ourselves. By taking simple steps to promote personal



resilience (taking care of our physical health and seeking support for stress issues), we can lead by example.

Suicide Prevention Month is a launch pad for yearlong engagement across the Navy. Starting in September and continuing through FY-15, Navy will promote the message "Every Sailor, Every Day" to encourage all Sailors, leaders, families and civilians to strengthen their connections with those around them. Emphasis will be placed on peer support, individual responsibility, open communication and bystander intervention as ongoing contributors to resilience and protective factors against suicide. Supporting products and resources will be released throughout the month on <a href="http://www.public.navy.mil/bupers-npc/support/21st\_Century\_Sailor/suicide\_prevention/spmonth/Pages/default.aspx">http://www.public.navy.mil/bupers-npc/support/21st\_Century\_Sailor/suicide\_prevention/spmonth/Pages/default.aspx</a>.

Additionally, from 1-30 September, all members of the Navy community (Sailors, families and civilians) are encouraged to "Pledge to Ask, Care, Treat (ACT)." The pledge is available online and is a voluntary, confidential commitment to yourself and others to take actions that promote open communication, ongoing support and proactive stress navigation.

Visit https://survey.max.g ov/index.php/437524/ lang-en to pledge today, and encourage others to do the same. We're all in this together.



# KEEP WHAT YOU'VE EARNED

Posters and Fact sheets are available for order through the Navy Logistics Library. Supply personnel must order them via https://nll2.ahf.nmci.navy.mil/Multiple print products, social media messaging, leadership talking points, and videos are available for download at www.nadap.navy.mil.

Title	Publication Number
Seabee Poster	NAVPERS 535017
Medical Poster	NAVPERS 535018
Submarine Poster	NAVPERS 535016
Surface Poster	NAVPERS 535015
Aviation Poster	NAVPERS 535014
Sailor's Fact Sheet	NAVPERS 535019
Drink Responsibly Every Time Banner	NAVPERS 535023
Plan Ahead for a Safe Ride Banner	NAVPERS 535022
Keep What You've Earned	NAVPERS 535024
It Wasn't Easy Getting Here Banner	NAVPERS 535021
You've Earned It banner	NAVPERS 535020
Table Tents	NAVPERS 535030
Table Coasters	NAVPERS 535029

### ADMITS WEB APPLICATION INFORMATION

The Alcohol and Drug Management Information Tracking System (ADMITS) was taken offline in September 2013 due to security issues. On 18 August 2014, an interim system was deployed, with limited capability, designed to meet minimum Fleet requirements with a cybersecurity compliant application. The system will allow commands to enter new Drug and Alcohol Reports (DARs) and those held on station while the system was offline. Command DAPAs can conduct record checks and once DARs have been submitted, Substance Abuse Rehabilitation Program (SARP) Counselor can enter screening and treatment records where applicable. Alcohol and Drug Control Officers' (ADCOs) access will be limited to unit level access until future versions have been released.

#### **ADMITS POC:**

Phone: 901-874-4214

Email: MILL ADMITS@navy.mil

### **ADMITS Frequently Asked Questions**

- Q When will the full version of ADMITS be released?
- A fully compliant version of ADMITS in total will be released in phases over the next year; each phase will provide users with increased functionality.
- Q How do I submit DARs for events that occurred when ADMITS was off line?

All DARs will be completed on line via the ADMITS web application. Click on the "Menu" tab, click on enter DAR record and complete the report. DARs will be approved on line via ADMITS by your Commanding Officer or their designated representative. Visit

- http://www.public.navy.mil/bupersnpc/support/21st\_Century\_Sailor/nadap/Pages/ADMITS.aspx for detailed guidance contained in the ADMITS "How to Guides."
- Q If I previously had an account will I still be able to access ADMITS?
- The majority of the accounts were transferred to the interim system; however, users without an assigned role were not able to be transferred. Users without an assigned role must submit an account registration form.
- Q How do I register for and ADMITS account?

Request a registration form by email: MILL\_ADMITS@Navy.Mil or visit

- A http://www.public.navy.mil/bupersnpc/support/21st\_Century\_Sailor/nadap/Pages/ADMITS.aspx
- Q How do I log in to ADMITS?
- Users must have access to, and log on to BOL. Then, click on the ADMITS link on the BUPERSONLINE home page. Users, who have not registered, will be able to access the ADMITS home page but will not have access to reports. Registered users will have a tabbed access to reports and tools based on their role assigned and area of responsibility.

# NEW RESEARCH SHEDS LIGHT ON FACTORS DRIVING YOUNG ADULTS TO ABUSE PRESCRIPTION DRUGS

It isn't peer pressure that is driving 18- to 29-year-olds to abuse and misuse prescription drugs, it's the desire to have fun with friends. That's the finding of a new Purdue University study, funded by the National Institute on Drug Abuse.

In the study, which was reported on by Medical News Today, the authors note that current efforts to prevent prescription drug misuse among young adults should focus more on other aspects of peer associations, rather than peer pressure.

"With the 18-29 age group we may be spending unnecessary effort working a peer pressure angle in prevention and intervention efforts. That does not appear to be an issue for this age group," said study co-author Brian Kelly, a professor of sociology and anthropology who studies drug use and youth cultures. "Rather, we found more subtle components of the peer context as influential. These include peer drug associations, peers as points of drug access, and the motivation to misuse prescription drugs to have pleasant times with friends."

Prescription drug misuse has risen considerably during the 21st century and is the most commonly abused substance after alcohol and marijuana for people 14 and older, according to NIDA. **Popular prescription drugs that are most frequently misused are sedatives, painkillers, and stimulants.** 

"People normally think about peer pressure in that peers directly and actively pressure an individual to do what they are doing," said Kelly, who also is director of Purdue's Center for Research on Young People's Health. "This study looks at that form of direct social pressure as well as more indirect forms of social pressure. We find that friends are not actively pressuring them, but it's a desire to have a good time alongside friends that matters."

The findings, collected from 2011-13, are based on survey interviews with 404 adults ages 18 to 29 who misused prescription drugs in the past 90 days. Two-hundred fourteen in-person interviews also were conducted. These individuals were recruited from popular nightlife locations such as bars, clubs, and lounges in New York City. Average misuse of prescription drugs, such as painkillers, sedatives and stimulants, was 38 times in the past 90 days.

This study evaluated the role of peer factors on three prescription drug misuse outcomes: the frequency of misuse; administering drugs in ways other than swallowing, such as sniffing, smoking, and injecting the drugs; and symptoms of dependency on prescription drugs.

TEST YOUR KNOWLEDGE

Did you know that the majority of people aged 12 or older who abuse prescription drugs report getting them from

a family member or friend?

#sharingisNOTcaring
#PrescriptionForDischarge

PRESCRIPTION FOR DISCHARGE Zero Tolerance. Infinite Risk.

Find more information about the Prescription for Discharge campaign on at <a href="https://www.nadap.navy.mil">www.nadap.navy.mil</a>

"We found that peer drug associations are positively associated with all three outcomes," Kelly said. "If there are high perceived social benefits or low perceived social consequences within the peer network, they are more likely to lead to a greater frequency of misuse, as well as a greater use of non-oral methods of administration and a greater likelihood of displaying symptoms of dependence. The motivation to misuse prescription drugs to have a good time with friends is also associated with all three outcomes. The number of sources of drugs in their peer group also matters, which is notable since sharing prescription drugs is common among these young adults."

Source: http://www.cadca.org/resources/detail/new-research-sheds-light-factors-driving-young-adults-abuse-prescription-drugs

# ALL ACTIVE DUTY AND RESERVE PERSONNEL ARE REQUIRED TO PROVIDE ONE URINE SAMPLE PER YEAR

DOD and OPNAVINST 5350.4D requires all Sailors be tested annually. Many commands wait until the last month of year and risk missing Sailors who may be on leave, liberty or TAD. With current random, new check-in, and end of FY testing requirements you would think every Sailor is tested at least once per year. However, there are many holes in this process, such as TAD, leave, Tele-Work, canceled tests, etc.

To reduce the burden of tracking down so many Sailors at year end or missing them all together, NADAP recommends commands conduct quarterly sub-unit sweeps of Sailors selected but not tested. This report is available within the Navy Drug Screening Program (NDSP) under the "Reports" section. Each quarter, this will reduce the number of untested Sailors by end of fiscal year. There's no limit to the number of Sub-Unit Sweeps; however, a command can only test five unit sweeps without upper Echelon authorization. Remember, NDSP cannot run a report of those who have not been selected; therefore the UPC will have to manually identify those members.

Below you will find some best practice tools that may be beneficial as you conclude the year and begin a new year.

- 1. To avoid large testing numbers later in the year, set up a testing pool within NDSP software. Insert members who have not provided a sample and perform a Sub-Unit sweep on that pool. The month of August and September can be used for all straggler's untested.
- 2. Conduct a Sub Unit sweep on a quarterly basis of those selected but not tested. This report can be generated within NDSP.
- 3. Conduct your command wide unit sweeps during second and third quarter of each year and avoid August and September. Any assigned personnel on leave or TAD can be placed in a different pool and tested upon return under Sub Unit sweep.
- 4. Personnel who have detached or TAD, contact the gaining command to ensure they are tested prior the end of fiscal year.

IF there are any questions or concerns, please contact us at

MILL\_NDSP@NAVY.MIL or call (901) 874-4204, DSN 882.



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Title	Publication Number
Prescription For Discharge FactSheet	NAVPERS 535502
Prescription For Discharge Poster 11x24	NAVPERS 535503
Prescription For Discharge Poster 18x24	NAVPERS 535504
Prescription For Discharge Postcard	NAVPERS 535505
Prescription For Discharge Table Tents	NAVPERS 535506
Infographic Poster	NAVPERS 535507
Prescription For Discharge Banner 5x8	NAVPERS 535508
Prescription For Discharge Banner 3x5	NAVPERS 535509
National Take Back Day Banner	NAVPERS 535510

### SOCIAL MEDIA MESSAGING

The below social media posts provide short, concise messaging for DAPAs, ADCOs, PAOs, health educators and Navy leadership to share with Sailors through digital channels. These messages will help Sailors make safe and responsible decisions regarding drinking and presription medication as part of the **Keep What You've Earned** (KWYE) campaign and the **Prescription for Discharge** campaign.



Research shows that 18- to 24-year-old Sailors are active on social media, receive much of their information from these channels, and are more receptive to messages on peer-to-peer networks. These messages are a great way to reach our target audience and to interact directly with Sailors. Sharing these messages through your social media channels is more impactful than you may realize. Please help us encourage Sailors to drink responsibly and use prescription medication properly and safely.

### KEEP WHAT YOU'VE EARN CAMPAIGN

Many Sailors showed their commitment to responsible drinking via the Keep What You've Earned pledge this summer, but responsible drinking is critical year-round. Are you committed? #drinkresponsibly

Responsible drinking is all about knowing your limit. Keep track of your drinking, and set a drinking limit before you start. For example, you may decide to have no more than 3 drinks per week or 2 drinks per night. #knowyourlimit #drinkresponsibly

Fact or fiction: "I can stop drinking anytime I want to." Maybe you can, but it's just an excuse to keep drinking. #knowyourlimit #drinkresponsibly

Looking for something to pass the time when you're bored? Check out the Navy's new mobile game, "Pier Pressure." Visit your iTunes or Google Play app store to download now, and post your high score in the comments below! #pierpressure http://ow.ly/BxvA4

### PRESCRIPTION FOR DISCHARGE CAMPAIGN

Do you have unused or expired medications? Take them back free of charge to your Navy Medicine facility or local pharmacy as part of National Take-Back Day on September 27 from 1000 to 1400. Visit www.dea.gov to find a participating location near you.#TakeBackDay

http://www.deadiversion.usdoj.gov/drug\_disposal/takeback/

Do you know the Navy's policy on self-reporting your medication? Learn the facts, then tell a friend. www.nadap.navy.mil #TellOnePerson

Did you know the Navy's zero-tolerance policy on drug use applies to the misuse of prescription drug, too? Learn the facts, then tell a friend or shipmate. #TellOnePerson

Tell a friend: Taking prescription drugs that have not been prescribed to you is considered misuse and can result in disciplinary action. #sharingisNOTcaring #TellOnePerson

Tell a friend: If you're taking a prescribed medication, be sure to report it to Navy Medical and your chain of command. #PrescriptionForDischarge #TellOnePerson